



ON BEHALF OF UNINSURED AND UNDERINSURED AMERICANS LIVING WITH HIV/AIDS: RYAN WHITE CARE ACT REAUTHORIZATION

WHEREAS, HIV/AIDS remains a major health care crisis in the United States, affecting more than 950,000 individuals; and

WHEREAS, the Ryan White CARE Act provides funds to support a network of health care, support services, and prescription drugs for people living with HIV/AIDS, especially the uninsured and underinsured who would otherwise be without prescription drug and access to care; and

WHEREAS, this program is a critical element in HIV/AIDS care, education, and treatment efforts by states, which have the primary responsibility for creating, maintaining, and monitoring a network of care in urban, suburban, and rural areas; and

WHEREAS, state AIDS Drug Assistance Programs (ADAPs), which provide life-saving HIV/AIDS medications to uninsured and underinsured individuals living in the United States and the U.S. territories, and serve approximately 135,000 people (approximately 14% of people living with HIV/AIDS in the United States) each year, are facing a fiscal crisis due to increased demand (as people live longer) and limited funding; and

WHEREAS, state ADAPs have been forced to institute waiting lists and other cost containment measures, including lowering financial eligibility requirements and limiting or reducing the number of drugs covered; and

WHEREAS, cost containment measures such as these can significantly affect the quality and the length of HIV/AIDS patients' lives who have no alternative for accessing medications; and

WHEREAS, recent ADAP funding efforts are not keeping pace with the growing number and increasing needs of patients. Furthermore, there is no guarantee that all the current enrollees in state ADAPs will continue to receive support for medication when the next ADAP fiscal year begins on April 1, 2005. Moreover, as of November 2004, there were still more than 813^[LAH1] people on waiting lists.

WHEREAS, the additional \$38.7 million that Congress recently appropriated for the state ADAPs for FY 2005, falls significantly short of the additional \$217 million in funding that the ADAPs, HIV/AIDS health care providers, and patient groups estimate is needed to maintain access to life-saving treatments for patients currently being served and to help prevent limitations on access to treatments for new patients.

WHEREAS, the reauthorization of the Ryan White CARE Act is scheduled for this year.

NOW, THEREFORE, BE IT RESOLVED, that the members of the National Lieutenant Governors Association call upon Congress to reauthorize the Ryan White CARE Act with adequate funding to support the health care needs of HIV/AIDS patients in our states and territories, particularly those who are uninsured or underinsured.

BE IT FURTHER RESOLVED, that the members of the National Lieutenant Governors Association call upon Congress to continue in the Ryan White CARE Act increased flexibility for state health departments to develop innovative and cost-effective approaches to providing HIV care and treatment, including the purchase of insurance.

BE IT FINALLY RESOLVED, that in implementing the Ryan White CARE Act and in confronting the HIV/AIDS epidemic more generally, the lieutenant governors believe that the best results will be achieved if the federal government, the states and territories, private insurers, the medical and pharmaceutical industries, and interested members of our communities work together in close partnership.

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Pennsylvania Lt. Governor Catherine Baker Knoll

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